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	maintenance fee notification	or directed otherwise	in Block I, by (a)	specifying a new	correspondence address;	; and/or (b) indicating a sep	arate "FEE ADDRESS" for	
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	·				Patti De	Michele	(Depositor's name)	
F-7	9/2004 FFANAIA3 0000	0048 141270 094817	71		Signature)			
, O1 F	C:1501 1330.00	DA			50	st. 24 20	OU (Date)	
	APPLICATION NO.	FILING DATE	F	FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	09/481,771	01/11/2000	Karl Michael Isha		am	PHA 23,656	6085	
	TITLE OF INVENTION: M	TETHOD FOR DYNAMIC	OANING IN RAT	E MONOTONIC F	REAL-TIME SYSTEMS			
	APPLN. TYPE	SMALL ENTITY	ISSUE FE	E 1	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1330		\$0	\$1330	12/16/2004	
	EXAMINER		ART UNI	T C	CLASS-SUBCLA SS	j		
	ALI, SYED J		2127		709-104000		_	
	<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	Koninklijke Philips Electronics N.V. Eindhoven, The Netherlands  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual   Corporation or other private group entity   Government							
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	4a. The following fee(s) are enclosed:  4  Sissue Fee			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.				
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	Authorized Signature	yand		Date 9/23/61				
	Typed or printed name AARON (NAKER)			<u> </u>	Registration	No. 48,627		

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